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8-15-02

PTO/SB/22 (10-00)  
Approved for use through 10/31/2002. OMB 0831-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 15270J-004750US
In re Application of DALE B. SCHENK		
Application Number 09/580,015		Filed May 26, 2000
For PREVENTION AND TREATMENT OF AMYLOIDOGENIC DISEASE		
Group Art Unit 1647	Examiner Turner, Sharon	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$
<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$1980

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ .

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

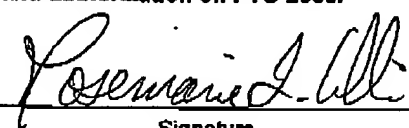
☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a), \_\_\_\_\_.

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August 12, 2002  
Date

  
Signature

Rosemarie L. Celli, Reg. No. 42,397  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/17 (11-01)  
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
 Form PTO/SB/17 (11-01) 002, OMB 0851-0032  
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<b>FEE TRANSMITTAL</b> <b>for FY 2002</b> <i>Patent fees are subject to annual revision.</i>		Complete if Known	
		Application Number	09/580,015
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	May 29, 2000
		First Named Inventor	Schenk, Dale B.
		Examiner Name	Turner, Sharon
		Group Art Unit	1847
TOTAL AMOUNT OF PAYMENT (\$)		1960	
		Attorney Docket No	15270J-004750US

<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<b>3. ADDITIONAL FEES</b> Large Entity      Small Entity																																																																																																																																																																																																																			
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SUBMITTED BY		Complete if applicable	
Name (Print/Type)	Rosemarie L. Colli	Registration No. (Attorney/Agent)	42,397
Signature	<i>Rosemarie L. Colli</i>	Telephone	650-328-2400
		Date	August 12, 2002

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